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Department of Health and Human Services

MaineCare

Accountable Communities Quality Framework

March 3, 2014

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Agenda

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- Welcome, Introductions
- Process
- Development Team
- Quality Domains and Weighting
- Criteria for Measure Selection
- Measure Overview by Domain, Changes since initial Proposal
- Quality Scoring
  - Benchmark Sources
  - Minimum Attainment Level
  - Points system
  - Sample Size

Quality Framework Development

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Aug 2013 – Feb 2014	•Convened AC Quality Framework Team
Sep 30, 2013	• Presented proposed measures to Pathways to Excellence Physician and Systems for feedback
Nov 2013	• Posted proposed Quality Framework (measures and scoring) on VBP website for public comment
Nov 2013 – Jan 2014	• Presented proposal to CMS, incorporated provider and CMS feedback, received informal approval

Quality Framework Team

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- MaineCare
  - Health Homes/ Behavioral Health Homes representation
- DHHS Office of Substance Abuse and Mental Health Services
- DHHS Office of Continuous Quality Improvement
- Improving Health Outcomes for Children (IHOC)
- Maine Health Management Coalition
  - Pathways to Excellence
  - Accountable Care Implementation (ACI)
  - Maine State Innovation Model (SIM)
- HealthInfoNet
- Maine Quality Counts
- University of Southern Maine, Muskie

Commitment to Annual Re-evaluation, Alignment

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- State Innovation Model objective
- CMS directive

26 Measures Across 4 Quality Domains: 18 tied to payment

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Quality Domain	Percent of Total Score	Core Performance	Elective Performance	Monitoring & Evaluation Only
Patient Experience	10%	1		
Care Coordination/ Patient Safety	30%	4	1	2
Preventive Health	30%	4		
At-Risk Populations	30%	6	5	3
Total	**100%**	**15**	**6** (must select 3)	**5**

Main Criteria for Selection of Metrics

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- Metrics measure success of the Triple Aim
- Address populations and needs prevalent in Medicaid
  - Children
  - Behavioral health
  - Long Term Services & Supports
  - Chronic conditions
- Maximize alignment of metrics with currently reported metrics in the State and nationally (Medicare ACOs, Health Homes, PTE, IHOC, etc.) to the extent feasible and appropriate
- Minimize reporting burden to providers, to extent feasible
  - Keep number of metrics to a reasonable number
  - Preference for claims-based measures
  - Phase in of pay for performance for non claims-based measures

Emphasize Alignment

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- 10 measures align with Medicare ACO
  - Out of those that don't
    - » 6 children specific
    - » 4 Behavioral Health measures
    - » All others align with Health Homes; 2 with Meaningful Use
- 19 measures align with Health Homes (4 with CMS Core Health Home measures)
- 9 measures align with Meaningful Use
- 5 align with CMS Core Adult Quality Measures
- 4 align with CHIPRA
- 5 align with IHOC

Minimize reporting burden to providers

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- 22 of 26 measures are claims-based
- 2 HbA1c Clinical measures will be reported through HealthInfoNet: Reporting only in Year 1
- 1 EHR measure will be reported by State using Meaningful Use reporting data
- 1 Patient Experience measure will be reported by providers through national database: Reporting only on full population

Quality Domain: Patient Experience

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Percent of Total Score	Core Performance	Elective Performance	Monitoring & Evaluation Only
10%	1. Clinician Group CAHPS		

- Alignment with Maine Quality Forum Patient Experience Matters Initiative
  - Hope to achieve funding for 2014 survey administration; 2015 reporting through central national CAHPS database
- Phase-in: Reporting only in Years 1-3
  - All payer populations
  - Intent to focus on Medicaid population only in Year 3
- CG CAHPS is not a requirement for participation in Accountable Communities, but is required to achieve full quality score.

Quality Domain:
Care Coordination/ Patient Safety

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Percent of Total Score	Core Performance	Elective Performance	Monitoring & Evaluation Only
30%	1. ACSC Admissions 2. Non-emergent ED Use 3. % PCPs qualifying for EHR Incentive Payment 4. All-Cause Readmissions	1. Use of High-Risk Medications in the Elderly	1. Cardiovascular Health Screening for People on Antipsychotic Meds 2. Imaging for low back pain

Change from Initial Proposal:

- Changed Imaging for low back pain from Core to Monitoring due to lack of ideal benchmark goal

Preventive Health

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Percent of Total Score	Core Performance	Elective Performance	Monitoring & Evaluation Only
30%	1. Well-Child Visits ages 0-15 mo., 2. Well-Child Visits ages 3-6 and 7-11 3. Adolescent Well-Care Visit (12-20) 4. Developmental Screening - First 3Yrs		

Change from Initial Proposal:

- Removed Breast Cancer Screening Measure, but committed to CMS to add again once measure modifications are approved for NQF to align with new clinical guidelines
- Added Well-Child Visits ages 0-15 mo., useful for tracking immunizations, which occur during these visits

Quality Domain: At-Risk Populations

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Percent of Total Score	Core Performance	Elective Performance	Monitoring & Evaluation Only
30%	Asthma 1. Medication Management (adults) Diabetes 2. Glucose Control (HbA1c) (adults) 3. Eye Care 4. LDL Behavioral Health 5. Follow-Up After Hospitalization for Mental Illness 6. Initiation & Engagement of Alcohol & Other Drug Dependence Tx	Asthma 1. Medication Management (children) Diabetes 2. HbA1c testing (adults) 3. Nephropathy Coronary artery disease 4. Cholesterol Management for Patients with Cardiovascular Conditions COPD 5. Spirometry Testing	Diabetes 1. Glucose Control (HbA1c) (children) 2. HbA1c testing (children) Behavioral Health/Long Term Services& Supports 3. Out of home placement days

Quality Domain: At-Risk Populations (Cont.)

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Change from Initial Proposal:

- Behavioral Health measures changed to this domain from Care Coordination/ Patient Safety
- Addition of Glucose Control (HbA1c) clinical measures
  - CMS required one clinical outcome "stretch" measure
  - Data collected through HealthInfoNet (HIN) lab data
    - » HIN will leverage result information it is sending providers
  - Reporting Only in Year 1 (lab results must be sent to HIN during performance year)
  - Years 2 & 3 scored on performance
- HbA1c testing for children changed to Monitoring from Elective

Benchmark Sources

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- Use of national Medicaid data wherever available.
- Where not available, DHHS will utilize:
  - MaineCare Health Homes and PCCM data
  - National Medicare data
  - Maine EHR Meaningful Use incentive program data
- Should a national Medicaid benchmark become available, the Department will begin use of that benchmark in the next performance year after it becomes available.

Minimum Attainment Level

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- Minimum attainment level (MAL) of 30th percentile to receive score on individual measure
- AC is Eligible for shared savings payment if it meets MAL on at least one measure in each of three pay for performance domains (Patient Experience excluded)
- MAL on <70% of measures in a domain
  - → warning and/or corrective action plan.
  - → Failure to meet the standard may result in termination and disqualification from shared savings.

Quality Scoring: Points per Measure

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- EHR measure is worth up to 4 pts.
- All other measures worth up to 2 pts. each

AC Performance Level	Quality Points per Measure	EHR Measure Quality Points
90+ percentile or percent benchmark	2 points	4 points
70+ percentile or percent benchmark	1.7 points	3.4 points
50+ percentile or percent benchmark	1.4 points	2.8 points
30+ percentile or percent benchmark	1.1 points	2.1 points
<30 percentile or percent benchmark	No points	No points

Quality Scoring: Points per Domain

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Domain	# Core Measures	# Elective Measures (must choose 3)	Total Possible Points Per Domain	Domain Weight
Patient/ Caregiver Experience	1	0	2	10%
Care Coordination/ Patient Safety	4	1	10 – 12	30%
Preventive Health	4	0	8	30%
At-Risk Population	6	5	16 - 18	30%
Total	**15**	**6 (choose 3)**	**38**	**100%**

Sample Size

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- Minimum sample size of 100 MaineCare members to enable scoring on performance on a measure
- If there are no score-able measures in one domain, weighting will be equally distributed across remaining domains
- Selection of Elective measures should take into account likely sample size

Thank you!

michelle.probert@maine.gov

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